

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
FREEDMAN	Charles	M.	543-4440
MAILING ADDRESS (Street)			FAX
P. O. Box 2750			543-4476
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96840-0001	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)			(State)
(City)			(State)
(City)			(State)

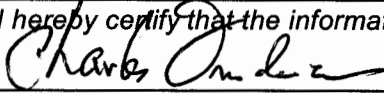
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		
Hawaiian Electric Company, Inc.		
MAILING ADDRESS (Street)		
P. O. Box 2750		
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96840-0001
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		
Marcia Wright		
MAILING ADDRESS (Street)		
P. O. Box 2750		
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96840-0001

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
Culture, Arts, Historic Preservation	Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

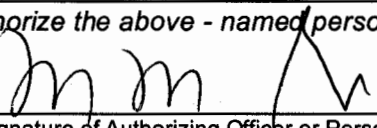
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

Jan 18 2005
(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Molly M. Egged		Secretary	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaiian Electric Company, Inc.		543-7728	
MAILING ADDRESS (Street)		FAX	
P. O. Box 2750		543-7523	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96840-0001	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
		1/31/05	
(Signature of Authorizing Officer or Person Represented)		(Date)	